

**DECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION**

☒ Declaration Submitted with Initial Filing
☐ Declaration Submitted after Initial Filing

Attorney Docket Number	X-12383M
First Name of Inventor	Jam's Arthur Hoffmann, tal.
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FSH AND FSH VARIANT FORMULATIONS, PRODUCTS AND METHODS

the specification of which

☐ is attached hereto

OR

☒ was filed on
(MM/DD/YYYY)

07/15/1999

as United States Application Number or PCT International

Application
Number

PCT/US99/16031

and was amended on
(MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached YES NO	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional applications(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
60/093,906	07/23/1998	

DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Attorney Name	Reg. No.
Arvie J. Anderson	45,263
Lynn D. Apelgren	45,341
Robert A. Armitage	27,417
Brian P. Barrett	39,597
Michael T. Bates	34,121
Roger S. Benjamin	27,025
William R. Boudreaux	35,796
Steven P. Caltrider	36,467
Paul R. Cantrell	36,470
Charles E. Cohen	34,565
Robert A. Conrad	32,089
Donald L. Corneglio	30,741
Gregory A. Cox	P47,504
Paul R. Darkes	33,862
Paula K. Davis	P47,517
Elizabeth A. Dawalt	44,646
John C. Demeter	30,167
Manisha A. Desai	43,585
Joanne Longo Feeney	35,134
Paul J. Gaylo	36,808
Francis O. Ginah	44,712
Amy E. Hamilton	33,894
Frederick D. Hunter	26,915
Thomas E. Jackson	33,064
Charles Joyner	30,466
Gerald P. Keleher	43,707
James J. Kelley	41,888

Attorney Name	Reg. No.
Paul C. Kimball	34,641
Paul J. Koivuniemi	31,533
Robert E. Lee	27,919
Kirby Lee	P47,744
James P. Leeds	35,241
Nelsen L. Lentz	38,537
Janet T. McClain	36,863
Douglas K. Norman	33,267
Aleen Palmberg	40,422
Raymond S. Parker, III	34,893
Thomas G. Plant	35,784
Edward Prein	37,212
James J. Sales	33,773
Michael J. Sayles	32,295
Robert L. Sharp	45,609
David M. Stermerick	40,187
Mark J. Stewart	43,936
Robert D. Titus	40,206
Robert C. Tucker	45,165
Tina M. Tucker	47,145
MaCharri Vomdran-Jones	36,711
Gilbert T. Voy	43,972
Andrea C. Walsh	34,988
Thomas D. Webster	39,872
Lawrence T. Welch	29,487
Alexander Wilson	P45,782

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	ELI LILLY AND COMPANY				
Address	ATTN: James J. Kelley				
Address	LILLY CORPORATE CENTER/DC1104				
City	INDIANAPOLIS	State	INDIANA	ZIP	46285
Country		Telephone	(317) 277-8110	Fax	(317) 276-5172

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

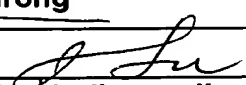
Name of Sole or First Inventor:		<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	James	Middle Name	Arthur	Family Name	Hoffmann
Suffix e.g. Jr.					
Inventor's Signature		<i>James Arthur Hoffmann</i>			Date
					1/15/01
Residence: City	Greenwood	State	IN	Country	US
Address	4272 Woodland Streams Drive				
Post Office Address	SAME AS ABOVE				
City	Greenwood	State	IN	Zip	46143
Country	US				
<input checked="" type="checkbox"/> Additional Inventors are being named on supplement sheet(s) attached hereto.					

Please type a plus sign (+) inside this box

PTO/SB/01 (8-96) (MODIFIED)

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office : U.S. DEPARTMENT OF COMMERCE

DECLARATION

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Jirong	Middle Name		Family Name	Lu	Suffix e.g. Jr.	
Inventor's Signature					Date	11/5/01	
Residence: City	Indianapolis	State	IN	Country	US	Citizenship	US
Address	6232 Vancouver Court						
Post Office Address	SAME AS ABOVE						
City	Indianapolis	State	IN	Zip	46326	Country	US